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Use of a non-dieting approach to support weight management patients to improve eating behaviours and dietary intake.

A thesis presented in partial fulfilment of the requirements for the degree of

Master of Science

In

Nutrition and Dietetics

at Massey University, Albany

New Zealand

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2017

Abstract

Background/Aim: Overweight and obesity numbers continue to increase locally and internationally. It is well known that the ability to make and maintain dietary changes long-term is difficult for many individuals. In recent years, weight management focus has moved towards understanding the impact of psychological factors on managing weight and supporting related changes. This pilot study explored whether a non-dieting programme is an effective intervention for people within the hospital system classified as overweight and obese.

Methods: Participants (n=31) were enrolled in a 28-week intervention study: 1-3 month normal diet run-in; 4-week group intervention programme; 24 weeks of follow-up including 3 individual follow-up sessions over 3 months. Data was collected at baseline, at the end of group sessions and at the individual sessions for anthropometry, behavioural and cognitive approaches to food, dietary intake and changes in eating habits.

Results: Positive change was observed in emotional and external trigger eating style scores, decreasing from 2.67 ± 1.04 and $3.06 \pm .67$ respectively at baseline to $1.98 \pm .86$ ($P < 0.002$) and $2.56 \pm .63$ ($P < 0.001$) at 6-month follow-up. Participants' reported mean (\pm SD) intuitive eating level increased from 35.9 ± 22.0 to 60.0 ± 23.5 from baseline to end of intervention ($P < 0.000$), increasing further at the 6-month follow-up (67.50 ± 26.356) ($P < 0.001$). Participant's median [95%CI] confidence levels increased significantly after completing the group sessions, from 6.0 [5, 7.5] up to 8.0 [7, 9] ($P < 0.001$, $r = 0.8$) and confidence levels remained higher, 7.5 [5, 8], at 6-month follow-up. Mean (\pm SD) weight did not change significantly during the study; 112.33 ± 26.67 kg at baseline and 112.04 ± 28.52 kg at 6-month follow-up.

Conclusions: Group-based intuitive eating weight management programmes can support participants to start making changes to improve their food-related behaviour and lifestyle to improve wellbeing and health.

Keywords: *Non-dieting, intuitive eating, group education, weight management*

Acknowledgements

There are many people I owe my thanks to for their support and involvement which has made this research and thesis possible. Firstly to the participants of the Eating for Your Health groups who so generously gave their time to participate in this study - without your valuable contributions, none of this would have been possible.

My supervisors, Associate Professor Rozanne Kruger and Dr Beverly Haarhoff, thank you both for your support and guidance.

Nikki Renall, thank you for your fabulous contributions to the group sessions and supporting these participants on their journey.

Erna van der Watt and Reena Soniassy, thank you for seeing my research participants in follow-up clinic and collecting data and supporting them to make changes.

Zakiya Bi-Hussein, thank you for your time inputting data from the multiple questionnaires and completing your masters as follow-up research to this study.

Maria Casale, thank you taking over the running of the group sessions and for also proof reading my thesis and generally being really awesome.

Jenna Schrijvers, for collating and inputting the 24-hour food recall and inputting data.

My team and work colleagues, you deserve a lot of thanks for listening to my frustrations and rants over the years regarding analysing statistics and writing a literature review.

My family, thank you for being patient over the past few years as I have completed data collection and writing my thesis.

Martyn, thank you for your frequent reassurances and listening so tirelessly to my frustrations and worries.

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List of Abbreviations

BMI	Body Mass Index
CBT	Cognitive Behaviour Therapy
CM	Centimetre
DEBQ	Dutch Eating Behaviour Questionnaire
DHB	District Health Board
EI	Energy In
EO	Energy Out
FFQ	Food Frequency Questionnaire
HDEC	Health and Disability Ethnicity Committee
HRQL	Health Related Quality of Life
IES	Intuitive Eating Scale
iPMS	Patient Information System
Kg	Kilogram
M	Metre
MOH	Ministry of Health
OECD	Organization for Economic Cooperation and Development.
Q-LES-Q-SF	Quality of life enjoyment and satisfaction Questionnaire – short form
QOL	Quality of Life
REE	Resting Energy Expenditure
SD	Standard deviation
NZ	New Zealand
WG	Wholegrain
WHO	World Health Organisation

Contribution to Research

Table 0.1: *Contributions to this study*

Researchers	Contribution to this thesis
Franica Yovich, NZRD	Main researcher, Eating for your Health facilitator, participant recruitment, screening, and testing, data collection, data analysis, statistical analysis, interpretation and discussion of results.
Associate Professor Rozanne Kruger	Main academic supervisor and guidance with design of thesis, methods, statistical analysis, interpretation of results, and revision.
Dr Beverly Haarhoff	Academic supervisor and guidance with design of thesis, methods, statistical analysis, interpretation of results, and revision.
Nikki Renall, NZRD	Eating for your Health facilitator
Reena Soniassy, NZRD	Assessment and review of participants in clinic and data collection
Erna van der Watt, NZRD	Assessment and review of participants and data collection
Zakiya Bi-Hussein	Data collation and entry